## **CLAIMS ONLY**

SERIAL NO FILING DATE

APPLICANT(S)

CLAIMS

|                 | AS FILED         |              | AF<br>1st AMI | TER<br>NOMENT                                    | AFTER<br>2nd AMENDMENT |      |  |
|-----------------|------------------|--------------|---------------|--|------------------------|------|--|
|                 | IND.             | DEP.         | IND.          | DEP.   | IND.                   | DEP. |  |
| 1               | $I_i$            |              |               | Ī  |                        |      |  |
| 2               | _'               | , i          |               |  |                        |      |  |
| 3               |                  | ,            |               | <del></del>                                      |                        |      |  |
| 4               |                  | - ,          |               | 1  |                        |      |  |
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| 9               | 1                | ·`           |               | -  | t —                    |      |  |
| 10              | <u> </u>         | <del>-</del> |               |  |                        |      |  |
| 11              |                  | . ,          |               | <del>†</del>                                     | <u> </u>               |      |  |
| 12              |                  |              |               | +  | <b>!</b>               |      |  |
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| 15              | <del>- , -</del> | : !          |               | ļ  |                        |      |  |
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| 32              |                  |              |               |  | 1                      |      |  |
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| 35              |                  |              |               |  |                        |      |  |
| 36              |                  |              | -             | -  |                        |      |  |
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| 38              |                  |              |               | <del>                                     </del> |                        |      |  |
| 39              |                  |              |               | <del>   </del>                                   |                        |      |  |
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|                 |                  |              |               | -  |                        |      |  |
| 41              |                  |              |               | <u> </u>   |                        |      |  |
| 42              |                  |              |               |  |                        |      |  |
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| 45              |                  |              |               |  |                        |      |  |
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| 48              |                  |              |               |  |                        |      |  |
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| 50              |                  |              |               |  |                        |      |  |
| TOTAL           |                  |              |               | <b>P</b>   |                        |      |  |
| IND.            | _                |              |               | <b>.</b> ⁴ ∣                                     |                        | _1   |  |
| TOTAL<br>DEP.   |                  |              |               |  |                        | _    |  |
| TOTAL<br>CLAIMS |                  |              |               |  |                        |      |  |

|                 | *       |      | *    |  | *        |            |
|-----------------|---------|------|------|--|----------|------------|
|                 | IND.    | DEP. | IND. | DEP.                                     | IND.     | DEP.       |
| 51              |         |      | I    |  |          |            |
| 52              |         |      |      |  |          |            |
| 53              |         |      |      |  |          |            |
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| 56              |         |      | ļ    | ļ  |          |            |
| 57              |         |      |      | <u></u>                                  |          |            |
| 58              |         |      |      |  |          |            |
| 59              | <u></u> |      |      | ļ <u> </u>                               |          |            |
| 60              |         |      |      |  |          |            |
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| 66              |         |      |      |  |          |            |
| 67              |         |      |      |  |          |            |
| 68              |         |      |      |  | ļ        |            |
| 69              |         |      | ļ    | -  | <u> </u> |            |
| 70<br>71        |         |      | ļ    | <del> </del>                             | <u> </u> |            |
| 72              |         |      |      |  |          |            |
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| 77              |         |      |      | -  |          |            |
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| 79              |         |      |      |  |          |            |
| 80              |         |      |      |  |          | -          |
| 81              |         |      |      |  |          |            |
| 82              |         |      |      |  |          | ·          |
| 83              |         |      |      |  |          |            |
| 84              |         |      |      |  |          |            |
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| 86              |         |      |      |  |          |            |
| 87              |         |      |      |  |          |            |
| 88              |         |      |      |  |          |            |
| 89              |         |      |      |  |          |            |
| 90              |         |      |      |  |          |            |
| 91              |         |      |      |  |          |            |
| 92              |         |      |      |  |          |            |
| 93              |         |      |      |  |          |            |
| 94              |         |      |      |  |          |            |
| 95              |         |      |      |  |          |            |
| 96              |         |      |      |  |          |            |
| 97              |         |      |      |  |          |            |
| 98              |         |      |      |  |          |            |
| 99              |         |      |      |  |          |            |
| 100             |         |      |      |  |          |            |
| TOTAL<br>IND.   |         |      |      |  |          | <b>—</b> 1 |
| TOTAL<br>DEP.   |         | -    |      | <b>—</b>                                 |          | <b>—</b>   |
| TOTAL<br>CLAIMS |         |      |      | M. San                                   |          |            |
| JENIMO I        |         |      |      | 18 18 18 18 18 18 18 18 18 18 18 18 18 1 |          |            |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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